



IDAHO TRANSPORTATION DEPARTMENT SIGN-IN SHEET

PUBLIC MEETING FOR:

LOCATION:

DATE/TIME:

The Idaho Transportation Department monitors attendance to ensure equal opportunity. We appreciate your providing this information. This information will only be used to monitor attendance at public meetings and for affirmative action purposes, as specified by law (CFR 42.21.9).

Name (Please print or write clearly)	Title/Representing	Address (City, State, and ZIP)	Phone	Please check the appropriate boxes	
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other
				<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Disabled	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other